

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL069001</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>03/16/2016</b>
NAME OF PROVIDER OR SUPPLIER  <b>THE GARDENS OF PAMLICO</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>22 MAGNOLIA WAY GRANTSBORO, NC 28529</b>		
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C 000	Initial Comments  Report of Biennial Construction Survey by Frank Strickland and Greg Cates on 03/16/2016:  Information obtained from the DHSR database indicates that this facility was licensed on 12/23/1996. Based on this information, we are requiring the facility to meet the 1996 North Carolina State Building Code Volume I General Construction Reference Section 409.1 Group I - Unrestrained, the 1994 Rules for the Licensing of Adult Care Homes, and applicable portions of the 2005 Regulations for Adult Care Homes. <b>FACILITY IS LICENSED FOR FORTY BEDS (12 BED SCU).</b>  Deficiencies have been cited and a Plan of Correction is required.	C 000		
C 101	Existing Licensed Fac- No less than '71 Rules  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost;	C 101		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

*Mistey Lewis*

Mistey Lewis, Executive Director

4/6/16

STATE FORM

6999

50HT21

If continuation sheet 1 of 6

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C 101	Continued From page 1  This Rule is not met as evidenced by: 1-Based on observations, this facility has not maintained the measures for the Special Locking (magnetic locks) on the exit doors as allowed by Section 1012.6 of the 1996 NC State Building Code. Section 1012.6.1. 4. F. requires, "If any required emergency release switch is of the locking type, all staff must carry emergency release switch keys."  Findings on 03/16/2016: The required emergency release switch located at each magnetically locked exit door was of the locking type with keyed switching that all staff in the SCU were not carrying. Of the several staff interviewed, none carried release switch keys. All staff who are responsible for the evacuation of the occupants must carry an emergency release key at all times when on duty.	C 101	The emergency release switch located at each magnetically locked exit door was of the locking type with keyed switching that all staff in the SCU were not carrying is now carrying a key at all times while on duty.	4/5/16
C 164	Housekeeping and Furnishings-Clean, Repaired  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities.  This Rule is not met as evidenced by: 1-Based on Observation, the facility failed to provide an environment in accordance with this Rule by not providing ventilation where odors are generated. This could affect residents and staff	C 164		

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C 164	Continued From page 3  cooking appliances.  Findings on 03/16/2016: The ansul spray nozzles are not directed on the gas burners but more towards the floor surface at the front of the stove due to stove placement.	C 164	The ansul spray nozzles are not directed on the gas burners but more towards the floor surface at the front of the stove due to stove placement has been repaired.	4/1/16
C 189	Building Equipment Maintained Safe, Operating  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.  This Rule is not met as evidenced by: 1-Based on observations, the facility emergency illumination and exit signage has not been maintained in a safe manner. This would affect all residents, staff and visitings guests by not providing illumination in the paths of egress in the event of an emergency.  Findings on 03/16/2016: The emergency lighting fixtures did not illuminate when tested on the emergency mode located in the Activity Room and Med Room-Blue Wing. The exit signs are not illuminated at the Memory Care interior entrance door and Dining Hall.  2-Based on observation, the facility has not maintained in a safe manner by improper storage of oxygen cyclinders. This could affect all	C 189	The emergency lighting fixtures did not illuminate when tested on the emergency mode locate in the Activity Room and Med Room-Blue Wing. The exit signs are not illuminated at the Memory Care interior entrance door and Dining Hall will be repaired. Estimated Completion date - 4/21/16.	

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C 189	<p>Continued From page 4</p> <p>residents and staff by potentially exposing them to hazards for a ruptured ruptured cylinder.</p> <p>Findings on 03/16/2016: There oxygen bottles being stored in Room 201 and Med Room-Blue Wing not in racks.</p> <p>3-Based on observations, the facility fire protection equipment was not maintained in a safe manner by allowing openings in the fire rated roof/ceiling assembly.</p> <p>Findings on 03/16/2016: The entire sprinkler supply piping had been stepped on in the attic which lead to all of the sprinkler heads to have dropped escutcheons and openings in the sheet-rock ceiling at each head penetration that are located in the Blue Wing Hall and Storage Closet.</p> <p>4-Based on observation, the facility has not maintained the plumbing fixtures for personal bathing.</p> <p>Findings on 03/16/2016: There are not any vacuum breakers installed at the Salon hair washing sinks and Central Bath tubs in the Blue Wing.</p> <p>5-Based on observation, the facility has not maintained in a safe and operating condition because the noted interior doors do not latch preventing the containment of fire and/or smoke from the room of origin. This could affect all residents and staff in the event of a fire.</p> <p>Findings on 03/16/2016: The door latching hardware is damaged for the following interior doors: (a) Central Bath-Memory Care</p>	C 189	<p>The oxygen bottles being stored in Room 201 and Med Room-Blue Wing are in racks.</p> <p>The entire sprinkler supply piping had been stepped on in the attic which lead to all of the sprinkler heads to have dropped escutcheons and openings in the sheet-rock ceiling at each head penetration that are located in the Blue Wing Hall and Storage Closet will be repaired. Estimated Completion date - 4/21/16.</p> <p>Vacuum breakers will be installed at the Salon hair washing sinks and Central Bath tubs in the Blue Wing. Estimated Completion date - 4/21/16.</p> <p>The door latching hardware that was damaged for the Central Bath- Memory Care and Central Bath-Blue Wing will be repaired. Estimated Completion date - 4/21/16.</p>	3/17/16	

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C 189	Continued From page 5  (b) Central Bath-Blue Wing  6-Based on observation, the facility has not maintained in a safe and operating condition because the noted interior doors were not closed to prevent the containment of fire and/or smoke from the room of origin. This could affect all residents and staff in the event of a fire.  Findings on 03/16/2016: The following fire-rated doors were wedged open: (a) Soiled Linen entry door into Main Laundry Room. (b) Kitchen entry door from Dining Hall	C 189	The fire-rated doors that were wedged opened in the Soiled Linen door into Main Laundry Room and Kitchen entry door from Dining hall will remain shut unless in use by staff.	3/16/16	